PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

application or Docket Number

10/019479

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPEOF			OTHER THAN		
T ¥	OTAL CLAIMS	2000 B 1000					92	RATE	PFEE	7.0	RATE	FEE	1
FOR NUMBER FILED NUMBER EXTRA								BASIC FE		OR	BASIC FEE	4	1
TOTAL CHARGEABLE CLAIMS minus 20= *								V¢ 0_		زفاره	STATE OF	\$ (4.7)	1
INDEPENDENT CLAIMS minus 3 = *								X\$ 9= X42=		OR			1
<u> </u>	MULTIPLE DEPENDENT CLAIM PRESENT								(SOC)	OR	5 X84 =	RESIDENCE.	
A Principal of the Control of the Co								+140=	心影響	OR	+280=	à do	
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL		1
CLAIMS AS AMENDED - PART II										.	OTHER	THAN	1
	Cart.	(Column 1) CLAIMS		(Colui		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A	The state of the s	REMAINING		NUM	BER	PRESENT	ŀ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AFTER AMENDMENT		PREVIO PAID		EXTRA		10016	FEE		TOGE	FEE	
NON	Total	1.17	Minus	** 0	l()	= 0		X\$ 9=		OR	X\$18=		ı
IME	Independent	*	Minus	***	2	<i>= 0</i>		X42=		OR	X84≃		1
_	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	LECAIM		 						1
	Λ	•					L	+140=		OR	+280≍		1
	$\langle \mathcal{V} \rangle$,	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	0	4.
_	17	(Column 1)		(Colur		(Column 3)	1 -						
MENDMENT B		REMAINING AFTER		NUM PREVIO	BER	PRESENT EXTRA	ll	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AMENDMENT		PAID			!		FEE			FEE	Į
	Total	· 10	Minus	** 2	2	- 20		X\$ 9=		OR	X\$18=		l
	Independent	• 184	Minus 🎄	and De	<u> </u>	= 6		X42= **	No.	OR	X84 <u>=</u> ∕6	16 L D. C.	
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and the second of the second o							L	+140=		OR	+280=	**************************************	
		· · · · · · · ·	•				A	DDIT. FEE		OR	ADDIT. FEE	9	1
-1		(Column 1) CLAIMS	•	(Colun		(Column 3)		·) 1			
AMENDMENTC		REMAINING AFTER		NUME PREVIO	BEA	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
NEW P		AMENDMENT		PAID		EXTRA	L		FEE		10112	FEE	
Q	Total	*	Minus	**	·-	=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X42=		OR	X84=		1
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												1
٠,	* If the entry in column 1 is less than the entry in column 2, write *0" in column 3.									OR	+280=		1
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **OF TOTAL ADDIT. FEE													4
		ber Previously Paid					r foun	nd in the app	ropriate box	in col	umn 1.		
													1